### Edgar Filing: NASSAU ROBERT H - Form 4

| Form 4  |   |  |                          |            |      |  |  |   |   |  |
|---|---|--|--------------------------|------------|------|--|--|---|---|--|
| December 19   |   |  |                          |            |      |  |  | OMB AF  | PPROVAL   |  |
| FORM  | 14 UNITED                               | STATES SECU<br>Wa  | RITIES A                 |            |      | NGE CO   | OMMISSION  | OMB<br>Number:  | 3235-0287   |  |
| Check th  | is box                                  |  |                          |            |      |  |  | Expires:  | January 31,   |  |
| if no long<br>subject to<br>Section 1<br>Form 4 o<br>Form 5 | 5. SECURITIES                           |  |                          |            |      |  |  |   | Estimated average<br>burden hours per<br>response 0.!             |  |
| obligatio<br>may cont<br><i>See</i> Instru<br>1(b).         | ns Section 17(                          | a) of the Public U<br>30(h) of the I                                   | Jtility Hol              | ding Cor   | npan | y Act of   | 1935 or Section  | 1   |   |  |
| (Print or Type I  | Responses)                              |  |                          |            |      |  |  |   |   |  |
| 1. Name and A<br>NASSAU R                                   | Symbol                                  | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>TORO CO [TTC] |                          |            |      | 5. Relationship of Reporting Person(s) to Issuer |  |   |   |  |
| (Last)  |   | of Earliest T  | -                        |            |      | (Check all applicable)                           |  |   |   |  |
| (Last)<br>8111 LYNE   | (First) (1                              | (Month/  | Day/Year)                | ransaction |      |  | _X_ Director<br>Officer (give t<br>below)  |   | Owner<br>er (specify  |  |
|   | (Street)                                | Filed(M  | nendment, Day/Yea        | -          | al   |  | 6. Individual or Jos<br>Applicable Line)<br>_X_ Form filed by O<br>Form filed by M             | ne Reporting Per  | rson  |  |
| BLOOMIN   | GTON, MN 5542                           | 20-1196  |                          |            |      |  | Person   |   | F8  |  |
| (City)  | (State)                                 | (Zip) Tal  | ble I - Non-I            | Derivative | Secu | rities Acqu                                      | ired, Disposed of,   | or Beneficial   | ly Owned  |  |
| 1.Title of<br>Security<br>(Instr. 3)                        | 2. Transaction Date<br>(Month/Day/Year) |  | Code (Instr. 3, 4 and 5) |            |      | d of (D)   | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s) | 6.<br>Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
| C   |   |  | Code V                   | Amount     | (D)  | Price  | (Instr. 3 and 4)   |   |   |  |
| Common<br>Stock   | 12/17/2012                              |  | М                        | 2,623      | А    | \$<br>26.805                                     | 3,751  | D   |   |  |
| Common<br>Stock   | 12/17/2012                              |  | S                        | 2,623      | D    | \$ 42.74   | 1,128  | D   |   |  |
| Common<br>Stock   | 12/18/2012                              |  | М                        | 2,300      | А    | \$ 16.89   | 3,428  | D   |   |  |
| Common<br>Stock   | 12/18/2012                              |  | S                        | 2,300      | D    | \$ 42.84   | 1,128  | D   |   |  |
| Common<br>Stock<br>Units                                    |   |  |                          |            |      |  | 31,196.4   | D   |   |  |

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5. Number<br>prof Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed of<br>(D)<br>(Instr. 3, 4,<br>and 5) | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Title and Amour<br>Underlying Securit<br>(Instr. 3 and 4) |                                 |
|---|---|---|---|--|---|--|--------------------|--|---------------------------------|
|   |   |   |   | Code V                                 | (A) (D)   | Date<br>Exercisable  | Expiration<br>Date | Title  | Amo<br>or<br>Num<br>of<br>Share |
| Non-Qualified<br>Stock Option                       | \$ 26.805   | 12/17/2012                              |   | М                                      | 2,623   | 11/01/2008   | 11/01/2017         | Common<br>Stock  | 2,6                             |
| Non-Qualified<br>Stock Option                       | \$ 16.89  | 12/18/2012                              |   | М                                      | 2,300   | 11/03/2009   | 11/03/2018         | Common<br>Stock  | 2,3                             |

## **Reporting Owners**

| Reporting Owner Name / Address   | Relationships |                            |  |       |  |  |
|--|---------------|----------------------------|--|-------|--|--|
|  | Director      | Director 10% Owner Officer |  | Other |  |  |
| NASSAU ROBERT H<br>8111 LYNDALE AVENUE SOUTH<br>BLOOMINGTON, MN 55420-1196 | Х             |                            |  |       |  |  |
| Signatures   |               |                            |  |       |  |  |
| /s/ Nancy A. McGrath,<br>Attorney-in-Fact                                  | 12            | 2/19/2012                  |  |       |  |  |

\*\*Signature of Reporting Person

Date

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.